

ARIZONA DEPARTMENT OF TRANSPORTATION
MOTOR VEHICLE DIVISION
1801 W. Jefferson Mail Drop 521M
P.O. Box 2100
Phoenix, Arizona 85001-2100

AVIATION, LIQUID USE AND MOTOR VEHICLE FUEL SUPPLIER BOND _____

KNOW ALL MEN BY THESE PRESENTS: That _____
NAME OF PRINCIPAL

AN INDIVIDUAL, A PARTNERSHIP, A CORPORATION

Doing business as or under _____
TRADE NAME, IF ANY

Of the city/town _____ and state of _____

As principal and _____
NAME OF SURETY

A corporation duly organized and existing under and by virtue of the laws of the State of _____ and duly authorized by the ARIZONA DEPARTMENT OF INSURANCE under the laws of the STATE OF ARIZONA, to do a general surety business in the STATE OF ARIZONA in the sum of (\$ _____) Dollars, lawful money of the UNITED STATES, to be paid to the said STATE OF ARIZONA, or its assigns, for which payment well and truly to be made we bind ourselves, our heirs, executors, administrators, successors and assigns jointly, and severally, firmly by these presents

THE CONDITIONS OF THE ABOVE OBLIGATION ARE SUCH THAT, WHEREAS the above bounded principal did on the _____ day of _____ 20_____, duly and regularly make application to the DIRECTOR of the ARIZONA DEPARTMENT OF TRANSPORTATION, for a license to be a supplier of Aviation, Liquid Use and Motor Vehicle Fuel in the state of Arizona, as provided in A.R.S., TITLE 28, CHAPTER 16, ARTICLES 1 & 2.

NOW, THEREFORE if the said supplier's license shall be granted to the said principal and if the said principal as a supplier shall well, truly and faithfully perform all acts and duties required by law, and all such additional duties as may hereafter be imposed upon the principal by law, and shall well, truly and faithfully pay to the STATE OF ARIZONA, at the time and in the manner provided by law any and all monies due the STATE OF ARIZONA from the principal as such a supplier, from and after the _____ day of _____ 20_____, then this obligation shall be void, otherwise to remain in full force and virtue.

Provided further that the limit of the liability of the surety is that of the penal sum above set forth, regardless of the length of period of time after the date hereof. No party other than the named obligee and the successors, administrators and assigns of the obligee shall have any right under this bond.

If the surety shall so elect, liability under this bond may be **TERMINATED BY THE SURETY BY THE GIVING OF SIXTY (60) DAYS WRITTEN NOTICE**, of such desire to terminate liability to the Director of the ARIZONA DEPARTMENT OF TRANSPORTATION, STATE OF ARIZONA, delivered to the address set forth above, in which event said termination of liability shall become effective at the expiration of such sixty (60) days written notice, as provided by law, unless a new bond shall have been filed by such principal and accepted by the Director of the ARIZONA DEPARTMENT OF TRANSPORTATION, STATE OF ARIZONA, prior to such time in which event such termination of liability shall be effective from the effective date of the new bond. Such notice of desire to terminate liability thereunder shall not affect the liability of the surety for any act or omissions of such principal occurring prior to the effective date of termination, but such surety shall continue to be liable under all of the provisions of this bond for all acts and omissions of such principal occurring prior to the time such termination shall become effective, to the same extent as if such notice of termination had not been given.

THIS BOND IS A CONTINUING BOND AND SHALL CONTINUE IN FULL FORCE AND EFFECT FROM AND AFTER THE DATE OF ITS EXECUTION UNTIL TERMINATED BY AND IN THE MANNER HEREIN SET OUT.

IN WITNESS WHEREOF, WE HAVE HERETO set our hands and seal this _____ day of _____, 20_____

PARTNER

PARTNER

PARTNER

COUNTERSIGNATURE (of Arizona Resident Agent or Surety)

NAME

NUMBER AND STREET

CITY ZIP PHONE

NAME OF PRINCIPAL

TRADE NAME, IF ANY

Signed _____
PRINCIPAL OR DULY AUTHORIZED OFFICER
Mailing Address of Principal:

NUMBER AND STREET

CITY STATE ZIP

SEND BOND CLAIMS TO:

SURETY

NAME

NUMBER AND STREET ZIP

CITY TELEPHONE

SURETY ATTORNEY-IN-FACT

TO BE COMPLETED BY SURETY COMPANY